

**Capacity Building Initiatives Due June 30, 2024** Revised 06.13.24

*Submit Deliverable if Submitted Invoice #1 and Received Start-Up Funds to Avoid Recoupment  
Submit Invoice #2 and the Deliverable if Start-Up Funds Not Received*

Category #	Category	Pre-requisite(s)	Deliverable
<b>WF</b>	<b>Workforce Development: 1A-1 Required to participate in any Workforce Development Categories</b>		
1C-1	Sustainability Plan	1A-1 Agency Survey	Submit <a href="#">1C- Sustainability Plan Template</a> and <a href="#">Invoice 2</a> if Start Up Funds not claimed.
<b>R95</b>	<b>Access to Care: Reaching the 95% (R95) Capacity Building (<del>Prerequisites 2C 2, 2D 1, 2D 2</del>)</b>		
2B-2	Field Based Services (FBS) Verified Claims	2B-1 –FBS Approved executed MOUs	Agencies approved for providing FBS must submit claims using the appropriate place of service codes as outlined in Field Based Services Standards and Practices. Agencies experiencing technical difficulties with submitting claims may be asked to submit documentation to verify new admissions through FBS.
2C-2	30–60-day period Outreach / Engagement Verified Claims	2C-1 Engagement Policy Approved	Initial engagement authorizations are verified based upon the dedicated field in the authorization request form which indicates that the request for authorization for a non-residential level of care (LOC) is being submitted for 30d/60d of service prior to the documentation of medical necessity.
2F-2	Bi-Directional Referrals for Low Barrier Care Claims Verified Claims	2F-1 Bi-Directional Referral Executed MOUs	The CalOMS referral source field must include a ‘Harm Reduction Agency/Syringe Services’ category. When this is completed for patient admitted for care, the agency will be credited with having a verified Harm Reduction/Overdose prevention Hub Admissions (non FBS).
2E-1	Service Design	n/a	Submit <a href="#">2E-1 Service Design Expectations</a> and <a href="#">Invoice 2</a> if Start Up Funds not claimed. Contact <a href="mailto:Member_Services@ph.lacounty.gov">Member_Services@ph.lacounty.gov</a> with inquiries.
2E-2	Customer Walk Through	n/a	Submit <a href="#">2E-2 Walk Through Summary Template</a> with <a href="#">Invoice 2</a> if Start Up Funds not claimed. Contact <a href="mailto:Member_Services@ph.lacounty.gov">Member_Services@ph.lacounty.gov</a> with inquiries.
2E-3	Service Design Plan	n/a	Submit <a href="#">2E-3 Service Design Plan with Invoice 2 Deliverable Based Efforts</a> if Start Up Funds not claimed. Contact <a href="mailto:Member_Services@ph.lacounty.gov">Member_Services@ph.lacounty.gov</a> with inquiries.
<b>AEFH</b>	<b>Assessing and Enhancing Financial Health</b>		
3B-1	AEFH Training with CIBHS	n/a	Submit attendance confirmation sent by CIBHS in March and Invoice 2 if Start-Up funds not claimed.
3B-2	Revenue/Expenditure Tracking Tool-Utilization	n/a	Submit <a href="#">3B-2 Six-mos- Revenue.Expenditure Tracker</a>

**Incentive Initiatives due June 30, 2024 with [Invoice 3: Incentive Verification](#) + Supporting Documentation- Revised 06.13.24**

Category #	Metric	Criteria/Calculation:	Reminder:
<b>WF</b>	<b>Workforce Development:</b>		
1a	At least 40% of Certified Counselors	Calculate: Divide Total Certified by All Counselors delivering direct services according to NACT	Provider must update <a href="#">NACA Monthly</a> – no separate submission required. Contact <a href="mailto:SAPC_NACT@ph.lacounty.gov">SAPC_NACT@ph.lacounty.gov</a>
1b	Minimum 1:15 LPHA to SUD Counselors ratio	Calculate: Divide total number of SUD Counselors by 15 to determine number of LPHAs required to receive incentive.	Provider must update <a href="#">NACA Monthly</a> – no separate submission required. Contact <a href="mailto:SAPC_NACT@ph.lacounty.gov">SAPC_NACT@ph.lacounty.gov</a>
<b>R95</b>	<b>Reaching the 95%</b>		
2a	<u>Meet R95 Champion Criteria:</u>	<input type="checkbox"/> <del>2C-1 (Engagement Policy);</del> <input type="checkbox"/> <del>2C-2 (Verified 30/60 Day Claims);</del> <input type="checkbox"/> 2D-1 (Admission Policy); <input type="checkbox"/> 2D-2 Discharge Policy <b>AND</b> at least <b>one</b> other <b>FULL</b> Category: <input type="checkbox"/> 2A- 1, <input type="checkbox"/> 2, <input type="checkbox"/> 3- Engagement <input type="checkbox"/> 2B- 1, <input type="checkbox"/> 2- FBS <input type="checkbox"/> 2E- 1, <input type="checkbox"/> 2, <input type="checkbox"/> 3- Service Design <input type="checkbox"/> 2F- 1, <input type="checkbox"/> 2- Bi-Directional Referrals	Provider must submit Capacity Building Invoice #1 and/or #2 with supporting deliverables in each of these categories
<b>MAT</b>	<b>Medications for Addiction Treatment</b>		
3a	At least 50% of clients with OUD and/or AUD receive MAT education and/or Medication Services that include MAT* *OTP settings ensure 50% AUD receive AUD education and/or Medication Services that include MAT for AUD	Calculate: MAT/Medication Service Code <sup>1</sup> and/or H2010M (MAT Education divided by Clients with OUD (F11*) and/or AUD (F10* diagnosis).  <sup>1</sup> Applicable MAT Service Codes: non-OTP settings: 90792, 99202-99205, 99212-99215, 99441-99443, H0034 and H2010M. Applicable MAT Service Codes: OTP Settings: S5001AB, S5001C, 90792, and H0034 specific to AUD medications.	SAPC’s HODA team will add this metric to the existing monthly CalOMS Data Quality Report (DQR), starting in June. Contact <a href="mailto:hoda_caloms@ph.lacounty.gov">hoda_caloms@ph.lacounty.gov</a> for questions
3b	At least 50% Clients Served agency-wide in this FY received naloxone	Calculate # of Clients that received naloxone <sup>2</sup> (by Rx or via distribution documented in the record) at agency during FY by Total # of clients served.  <sup>2</sup> Applicable codes: Non- OTP H2010N; OTP- numerator codes are S5000D and S5001D with documentation.	SAPC’s HODA team will add this metric to the existing monthly CalOMS Data Quality Report (DQR), starting in June. Contact <a href="mailto:hoda_caloms@ph.lacounty.gov">hoda_caloms@ph.lacounty.gov</a> for questions

Incentives Continued			
Coord	Optimizing Care Coordination		
4a	At least 75% of clients served this FY have signed Release of Information (ROI) with internal (other SUD) or external (physical health, etc.)	Calculate: Divide Number of Clients with signed ROI form by total number of clients served this FY	For FY 23-24, all providers who submit an invoice indicating achievement will be reimbursed
4b	30% of clients during FY are referred and admitted to another level of SUD care within 30 days of discharge	Calculate: Number of Clients referred to other LOC at discharge by number of total number of Clients Discharged	SAPC's HODA team will add this metrics to the existing monthly CalOMS Data Quality Report (DQR), starting in May. Contact <a href="mailto:hoda_caloms@ph.lacounty.gov">hoda_caloms@ph.lacounty.gov</a> for questions
Data	Enhancing Data Reporting		
5a	At least 30% of CalOMS admission and discharge records agency-wide within this FY are submitted timely and 100% complete.	Calculate based on HODA Branch's Data Quality Report: Number of Admin and Discharge records 100% completed by # of ALL admission and discharge records submitted.	SAPC's HODA team have already added this metric to CalOMS Data Quality Report (DQR), which is available on the 15 <sup>th</sup> of each month. Contact <a href="mailto:hoda_caloms@ph.lacounty.gov">hoda_caloms@ph.lacounty.gov</a> for questions

We kindly request submission to [SAPC-CBI@ph.lacounty.gov](mailto:SAPC-CBI@ph.lacounty.gov) by 11:59pm on June 30, 2024 with  
 Subject Line: Agency Name CB- (list category #s 1C,2B, 2E, 3B) or  
 Subject Line: Agency Name- Incentives (list category #s- example: 1a, 3b, 5a)

This is requested so that the various teams responsible for each category can expedite review of submissions.